12-22-06 RECEIVED Pg:

CENTRAL FAX CENTER

## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents

DEC 2 2 2006

P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block I for any change of address)

28694

7590

09/22/2006

NOVAK DRUCE & QUIGG, LLP 1300 EYE STREET NW **400 EAST TOWER** WASHINGTON, DC 20005

Note: A certificate of mailing can only be used for dougstic mailings of the Foo(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Fcc(s) Transmittal is being deposited with the United States Postal Service with sufficient possage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

| Juanita A. Risinger | (Depositor's name) |
|---------------------|--------------------|
| Transa O Kisheur    | (Signature)        |
| December 22. 2006   | (Dete)             |
|                     |                    |

| APPLICATION NO. | FILING DATE |     | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|-----|----------------------|---------------------|------------------|
| 10/707,337      | 12/05/2003  | • • | Staffan Wendeberg    | 00173.0049.PCUS00   | 1336             |

TITLE OF INVENTION: GEARSHIFT UNIT FOR MOTOR VEHICLES

| APPI.N. TYPE  | SMALL ENTITY   | ISSUE FEE DUE   | PUBLICATION FEE DUE  | PREV. PAID ISSUE FEE   | TOTAL FEE(S) DUE                            | DATE DUB                 |  |  |
|---|--|---|--|--|---|--------------------------|--|--|
| nonprovisional  | NO   | \$1400  | \$300  | \$0  | \$1700                                      | 12/22/2006               |  |  |
| EXAMINER  |  | ART UNIT  | CLASS-SUBCLASS   |  |   |                          |  |  |
| RODRIGUEZ, SAUL   |  | 3681  | 192-220400   | •  |   |                          |  |  |
| CFR 1.363).  Change of corres Address form PTO/S Address form PTO/S PFec Address in PTO/SH/47; Rev 03- Number is required  3. ASSIGNEE NAME & PLEASE NOTE: Un recordation as set for (A) NAME OF ASSI | dication (or "Fee Address 02 or more recent) attack.  AND RESIDENCE DATA  alcass an assignee is ident the in 37 CFR 3.11. Compared to the comp | indication form and Use of a Customer  A TO BE PRINTED ON diffied below, no assignee pletion of this form is NO | or agents OR, alternative (2) the name of a single registered attorney or a 2 registered patent attorney or the patent attorney or the patent attorney or the patent of th | 3 registered patent attornively, e firm (having as a member agent) and the names of using a street and the names of using a street agents. If no namprinted.  be) atent. If an assignee is ideassignment. and STATE OR COUNT | cra 2 QUI c is 3  cartified below, the docu | ment has been filed fo   |  |  |
| 4a. The following fcc(s) are submitted:  Size Fee Publication Fcc (No small entity discount permitted)  Advance Order - # of Copics   |  |   | 4b. Payment of Fec(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed.  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized to charge the required fec(s), any deficiency, or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).   |  |   |                          |  |  |
|   | atus (from status indicate   |   |  |  |   |                          |  |  |
| NOTE: The Issue Fee at  | ns SMALL ENTITY state<br>and Publication Fee (17 representation)<br>records of the United St   | uired) will not be accepte  | d from anyone other than t   | ger claiming SMALL EN<br>he applicant, a registered  |   |                          |  |  |
| Authorized Signature Typed or printed nan This collection of informan application. Confiden   | ne Tracy w   | Druce  FR 1.311. The information of U.S.C. 122 and 37 CFR   | on is required to obtain or  | Registration No.   | ic which is to file (and by                 | athering, oreoaring, and |  |  |

Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PAGE 1/2 \* RCVD AT 12/22/2006 4:15:56 PM [Eastern Standard Time] \* SVR:USPTO-EFXRF-5/21 \* DNIS:2738300 \* CSID:7137510013 \* DURATION (mm-ss):00-54:00MMERCE